

Policy alienation: A comparative case study of public professionals implementing policy programs

Lars Tummers
Victor Bekkers
Bram Steijn

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Dept. of public administration
Erasmus University Rotterdam
P.O. Box 1738
NL-3000 DR Rotterdam
Tummers@fsw.eur.nl
Bekkers@fsw.eur.nl
Steijn@fsw.eur.nl

Abstract

Nowadays, many public professionals feel estranged from the policy programs they implement. This is worrisome, as for a successful implementation, some identification with the policy is required. In this article, we frame these identification problems in terms of policy alienation, based on the sociological concept work policy alienation, and show how this can be used in policy implementation research. Further, by comparing two Dutch professionals groups, we observe six factors which are important for explaining policy alienation. Last, we show the relevancy of the policy alienation framework for analyzing the impact of identification problems on policy performance.

1 Introduction

In 1998 a new policy was implemented in Dutch high schools, aiming to prepare students better for university by learning them to work independently, acquire practical skills to apply their knowledge and obtain more integrated knowledge. The implementation of this policy, called the Second Phase as it focused on the later years in secondary education, was not without problems for the teachers implementing it. According to a survey of 775 teachers, they often did not see the meaning of the reform, making it more difficult for them to identify with it (Commission, 2008). The following quote illustrates this (Commission, 2008:139):

“The teachers believe that the implementation of the Second Phase negatively influenced the grades of the students and the way they learn. They are very explicit about the negative influence of the Second Phase on the motivation of the students, their own motivation, the quality of the lessons and the organization of the school.”

This example is not unique: public professionals often appear to have difficulties identifying with the policy which they have to implement. Research shows that public professionals are experiencing increasing pressures as they have to take into account several output performance norms, and these often conflict with their own professional standards or with the demands of increasingly empowered clients. Several studies show an increasing discontent among public professionals (Hebson, Grimshaw, & Marchington, 2003; Pratchett & Wingfield, 1996; WRR, 2004).

In this article we will analyze such problems that public professionals have with the policy they have to implement in terms of “policy alienation”. This concept, as we have developed elsewhere (Tummers et al., 2008), elaborates on the concept of work alienation as developed in the field of sociology of work and labor (for example Blauner, 1964). We define policy alienation as a general cognitive state of psychological disconnection from the policy program being implemented, here by a public professional who regularly interacts directly with clients. Although the identification of the implementing professionals or street-level bureaucrats with the policy they have to implement is often stated as a prerequisite for effective implementation (Elmore, 1985; Ewalt & Jennings, 2004; Goggin, Bowman, Lester, & O’Toole, 1990:130; Lipsky, 1980; Pressman & Wildavsky, 1984; Riccucci, 1995; Sabatier, 1986; Sabatier, 2005), it is rarely systematically studied. Studying the policy alienation of public professionals and its causes is not only theoretically interesting (due to its links with policy implementation), but is also vital for policy-makers, as it could help policy makers identify and possibly affect the important factors for the identification of professionals with policies, and so improve the policy implementation process.

This brings us to the objectives of this article. The first objective is to show the relevancy of the policy alienation concept in the field of policy implementation. This is done in Section 2, by means of a literature study. In this section, we also show how policy alienation can be conceptualized. The second objective is to determine common factors influencing policy alienation. In contrast to the first objective, this will be done inductively, by means of a comparative case study. This is shown in Section 3. In the last section we will conclude by relating policy alienation to one of the most important concepts of implementation research, that is, policy performance.

2 Implementation and alienation

In this section we will show the relevancy of the policy alienation concept in the field of policy implementation. Next, we will conceptualize policy alienation.

2.1 Policy implementation research

In the 1970s and 1980s there was an intense debate about the understanding of the phenomenon of policy implementation (Rist, 1995). This started with the seminal work of Pressman and Wildavsky (1984). Implementation, according to them (1984:xiii-xv), means just what the dictionary says it does: “to carry out, accomplish, fulfill, produce, complete.” Van Meter and Van Horn (1975:447-448) provide a more specific definition, stating that “policy implementation encompasses those actions by public or private individuals (or groups) that are directed at the achievement of objectives set forth in prior policy decisions.”

The early implementation scholars were particularly concerned about the relationship between policy formation and its implementation. This led to a debate between the “top-down” and “bottom-up” perspectives on policy implementation. Although more nuanced approaches have been developed more recently (for example Goggin et al., 1990; Sabatier & Jenkins-Smith, 1993), examining top-down/bottom-up perspectives is still highly useful for understanding contemporary policy implementation (Hill & Hupe, 2002:82; Sabatier, 2005:17).

Top-down perspectives (Hogwood & Gunn, 1984; Pressman & Wildavsky, 1984; Sabatier & Mazmanian, 1979) view the implementation of policy as basically a mechanistic process which is completely isolated from policy formation. Implementation is a rational process that can be pre-planned and controlled by the policy formulators. It is paramount that these policy formulators keep control over the sequence of stages which has to be followed and develop a program which minimizes conflict and deviation from the goals set by the “policy hypothesis”. The requirements of implementation are presented as a generalized list of conditions, which if met, will enable effective implementation.

Bottom-up perspectives (Barrett & Fudge, 1981; Elmore, 1985; Hanf, 1982; Hjern & Hull, 1982; Lipsky, 1980), on the other hand, see policy implementation in a much more dynamic and interactive process. In their view, policy formulation and policy implementation are not strictly separated. Further, they note that control over people is not the way forward to effective implementation. Instead of regarding human beings as chains in line of command – or cogs in a machine - policy formulators should realize that policy is best implemented by what Elmore (1985) termed “backward mapping” of policies, which involves defining success in human or behavioral terms and not in the completion of a “policy hypothesis”.

Policy implementation research and alienation

Although the top-down and bottom-up perspectives differ in a number of important respects, they agree on the notion that loyalty or commitment of the implementer to the policy is a prerequisite for effective implementation. Sabatier (1986), for example, states as one of the necessary conditions for effective implementation of legally stated policy objectives “committed and skilful implementers who apply themselves to using their discretion so as to realize policy objectives”. In the same vein, Van Meter and Van Horn (1975:482) note:

“Implementation may fail because implementers refuse to do what they are supposed to do. Dispositional conflicts occur because subordinates reject the goals of their superiors ... for numerous reasons: they offend implementers” personal values or self-interest; or they alter features of the organization and its procedures that implementers desire to maintain.”

More recent policy implementation research continues to stress the importance of loyalty/commitment of the implementers for policy performance (Brynard, 2005; Ewalt & Jennings, 2004; Peters & Pierre, 1998). As Ewalt & Jennings (2004:453) put it, “It is clear from the literature there is much that members of an organization can do to stymie policy implementation.”

Having provided a background of policy implementation research, we are now able to examine how the policy alienation concept can be linked to the world of policy implementation. As stated, we define policy alienation as a general cognitive state of psychological disconnection from the policy program being implemented, here by a public professional who regularly interacts directly with clients. We focus on professionals implementing policies, as when these case workers have to implement a

policy, more trade-offs will occur than in the case of regular street-level bureaucrats. This is because public professionals, as members of professional communities or associations, also have to deal with several professional norms and standards (Freidson, 2001).

The policy alienation perspective builds upon policy implementation research as it emphasizes the crucial role of implementers for policy performance. It also adds to contemporary policy implementation research by framing the experiences of the public professionals, with the policy they have to implement, into a coherent framework; that of policy alienation. Although, as stated, numerous scholars emphasized the crucial role of committed or loyal implementers, few have provided a coherent framework – including causes and effects - for analyzing this topic. The policy alienation framework can possibly be such a framework, thereby elaborating on the concept of work alienation as developed in the field of sociology of work and labor. In this way, using the concept of policy alienation provides an interdisciplinary approach for examining the experiences of public professionals with the policy they have to implement. We will examine this further in the following paragraph, which starts with a background of the alienation concept.

2.2 From work alienation to policy alienation¹

The intellectual roots of the alienation concept can be found in the work of Karl Marx (1961 [1844]), who concentrated on objective work alienation: workers are alienated when they do not own the means of production or the resulting product. Most contemporary sociologists writing on alienation draw on Marx (Blauner, 1964; Seeman, 1959; Shepard, 1971) although, in contrast to Marx, they focus on subjective work alienation: alienation as perceived by the worker (Kanungo, 1982: 19). An important study in this field is by Blauner (1964) who distinguished three alienation dimensions: powerlessness, meaninglessness and social isolation.

In the public administration literature, the concept of work alienation has not gone unnoticed. A number of scholars have used the concept. Pandey & Kingsley (2000, see also DeHart-Davis & Pandey, 2005), for instance, have shown that work alienation is a strong predictor of the degree of red tape public employees experience.

We, however, focus on policy alienation, not work alienation. This policy alienation concept differs in three important aspects from work alienation. First, it looks at alienation from the policy being implemented, rather than from the job being done. Second, it focuses on the public sector, whereas the work alienation concept was primarily developed for the private sector. Third, it considers professionals, whereas the work alienation concept predominantly focuses on manual workers.

Our next step is to define its dimensions based on Blauner's ideas concerning work alienation. As with work alienation, policy alienation is seen as a multidimensional concept.

Policy powerlessness

Powerlessness is the first dimension of work alienation discerned by Blauner (1964). A powerless worker feels himself to be a thing, an object controlled and manipulated by others or an impersonal system. Blauner (1964:16) discerns four "modes" of powerlessness: 1) separation from ownership of the means of production and the resulting product; 2) the inability to influence general managerial policies; 3) the lack of control over employment conditions, and 4) the lack of control over the immediate work process.

We can apply these four modes in distinguishing between three levels of policy powerlessness. In the realm of making and implementing policy, powerlessness relates to the degree of influence public professionals have to shape the policy program they have to implement. This influence may be exercised on a strategic (Blauner's second mode), tactical (Blauner's third mode) or operational level (Blauner's fourth mode). The first of Blauner's modes is not relevant here because it concerns objective alienation, whereas we focus on subjective alienation.

When there is a low degree of influence on the strategic policy level, professionals will likely experience feelings of powerlessness. This can be the case when, for example, a new policy is drafted without the help of the professionals who have to implement it.

The tactical level refers to the perceived influence of the professionals on decisions concerning the way the policy is implemented within their organization. This relates to how policy goals are transformed into specific performance requirements, which the organization has to meet, as well as to how resources are allocated among the organization's units (staff, budgets, etc.) in order to contribute to meeting these performance goals. In many agencies, performance management systems

¹ This section is largely based on Tummers, Bekkers, & Steijn (2008)

have been introduced to manage the implementation of policy programs. However, several studies have shown that these systems can have undesirable effects in which output criteria become more important than societal outcomes (Smith, 1995; Van Thiel & Leeuw, 2002). The more that professionals can effectively address these perverse effects at the agency level, the less they will experience powerlessness.

Lacking significant control over the operational working process is another mode of powerlessness. In public administration literature, this is primarily described in terms of a civil servant's discretion in implementing policies when interacting with clients. That is, the implementer has some freedom in terms of the sort, quantity and quality of sanctions and rewards (Lipsky, 1980). The more discretion public professionals perceive when implementing a policy, the lower their feelings of powerlessness.

Policy meaninglessness

The second dimension of alienation distinguished by Blauner is meaninglessness. In the work alienation literature, meaninglessness has been defined as "the inability to comprehend the relationship of one's contribution to a larger purpose" (Sarros, Tanewski, Winter, Santora, & Densten, 2002: 304). According to Blauner (1964: 23), work is more meaningful when someone 1) works on a unique and individual product; 2) works on a larger part of the product; or 3) is responsible for a larger part of the production process.

In the realm of policy making and implementation, meaninglessness refers to a professional's perception of the contribution the policy makes to a greater purpose. As with powerlessness, meaninglessness can occur at the strategic, tactical and operational levels.

At the strategic level, meaninglessness refers to a professional's perception that a policy program is not actually dealing with specific societal problems, or with the provision of desirable public goods and services, such as delivering financial protection and security.

At the tactical level, meaninglessness is based on the professional's perception of the agency's contribution in handling specific problems or delivering public goods. When agencies adopt managerial policies that focus on output goals that lack a clear relationship with specific societal goals, professionals are more likely to experience the policy as less meaningful.

Finally, at the operational level, meaninglessness reflects the professionals' perceptions of the contributions their own activities make to dealing with concrete, individual cases, as manifestations of broader societal problems. For instance, are they really helping people? If this is not the case, they will probably experience policy meaninglessness.

Role conflicts

Blauner sees social isolation as the third dimension of work alienation. Social isolation is generally seen as lacking a sense of belonging to the organization in which you work, and being unable to identify with the organization. According to Blauner (1964:23), "membership in an industrial community involves commitment to the work role and loyalty to one or more centers of the work community. Isolation, on the other hand, means that the worker feels no sense of belonging in the work situation and is unable to identify with the organization."

Social isolation in relation to policy implementation is best analyzed using the notion of role conflicts. When implementing a policy, professionals experience demands based on various logics, which stress different values and norms, and have a legitimacy of their own (Freidson, 2001). Role conflicts arise when professionals perceive these demands to be incompatible. The social isolation concept looks specifically at the sense of belonging to one logic, that of the organization. In contrast, the role conflict concept acknowledges the multiple logics that a professional has to deal with when implementing a policy. For instance, when implementing a policy, it is vital that professionals not only identify with their organization, but also with the clients they treat.

We distinguish four different logics (cf. Freidson, 2001). First, the institutional logic referring to demands derived from policy contents; these are often laid down in formal rules and regulations, such as the policy goals to be achieved. Second, the organizational logic, which formulates a number of managerial demands that guide the proper implementation of the policy by the agency. Third, the professional logic, which expresses demands to be followed if one is to act professionally as a member of a professional community. Fourth, the client logic that focuses on the demands and values that a citizen (very often as a client of public administration) advances and which reflect their personal situation and interests.

These logics can conflict with each other. For instance, when a public professional has the perception that certain rules have to be followed (institutional logic) but, in doing so, the needs of the individual client (client logic) cannot be fulfilled. Such role conflicts heighten the degree of policy alienation experienced by public professionals.

3 Comparative case study of teachers and insurance physicians

3.1 Method

The second objective is to determine common factors influencing policy alienation. This will be done inductively, by means of an exploratory case study. It is a case study since we investigate “how” and “why” questions (how can policy alienation be understood and why does it occur) in a contemporary setting over which we have no control. The study is exploratory in the sense that the available literature and existing knowledge base on policy alienation and its factors are poor (Yin, 2003:9,22). We have chosen to examine the factors influencing policy alienation inductively. Although there is a vast amount of literature concerning factors influencing powerlessness, meaninglessness and role conflicts (for example Kanungo, 1982; Ramaswami, Agarwal, & Bhargava, 1993), this literature is not specified towards implementing public policies. Further, by examining the factors rooted in the data, we do not make the mistake of imposing so-called “predetermined understanding” to the data (Heath, 2007:519).

We have researched the factors and degree of policy alienation of 1) Dutch secondary school teachers implementing the Second Phase and 2) Dutch insurance physicians implementing a new work disability decree. We have chosen these two policies as they are both clearly demarcated and important for the implementing professionals (Kirschner & Prins, 2008:134; NVVG, 2005). The teachers and insurance physicians differ in a number of factors which could influence policy alienation, according to a pilot study we conducted. Firstly, they operate in strongly different institutional contexts; education and social security, although they share the Dutch context. Secondly, they work in different types of organizations; respectively fairly egalitarian schools and the more hierarchic Dutch Institute for Employees’ Insurance (Uitvoeringsinstituut werknemersverzekeringen, or UWV). Thirdly, teachers are far less professionalized compared to insurance physicians. In this way, we follow a most different cases design (Lijphart, 1975). Doing so, we can examine what the effect is of variation on different factors on the degree of policy alienation.

In order to get an in depth and reliable insight we used data triangulation (Yin, 2003:98). For both groups of professionals, we conducted an extensive document analysis, in which relevant policy documentation, professional magazines, newspaper articles and websites were studied. In the case of the teachers, a number of policy documents were constructed by the Dutch parliamentary commission “Education Innovations” (2008). This commission produced a final report (Commission, 2008). Further, they conducted several interviews with, among else, teachers (Commission: Interviews, 2008). Last, a large scale survey research of 775 teachers (open survey, no response rate) was executed (Kirschner & Prins, 2008).

After this document analysis, semi-structured interviews with four individual physicians and five individual teachers were held, which we all recorded and subsequently transcribed. Specifically for the teachers, we examined what kind of teacher one is - content-oriented or student-oriented -, thereby drawing on the operationalization of Van Veen (2003). Later on, this will be explained more fully. Last, we checked the validity of our reconstruction by presenting the preliminary results to the interviewed professionals.

3.2 Background of the policies

This section shortly describes the background of the two policies.

Work disability decree

Between 1987 and 2003, the number of people receiving welfare payments - due to work disability - rose substantially in the Netherlands. In that period, work disability funds were often used by organizations as an easy way to smooth internal reorganizations, to reduce staff numbers. In order to reduce the spiraling costs, as well as the number of recipients, the Dutch government decided to introduce stricter policies.

The adjusted assessment decree (“aangepast schattingsbesluit”, or ASB), which was implemented in October 2004, changed the insurance conditions for people already receiving work disability benefits. Together with a new law regarding work and income, the ASB aimed to save a total of €2 billion per year (SZW, 2005). Two major changes concerning the ASB are firstly that almost every person receiving work disability benefit had to be re-examined. Secondly, these re-examinations were based on stricter criteria. As a result, from the 230,000 re-assessed persons between October 2004 and January 2008, approximately 90,000 saw their benefits lost or lost (Van der Burg & Deursen, 2008:80). The ASB is implemented in programs by the Dutch Institute for Employees’ Insurance (UWV), a semi-autonomous agency of the Ministry of Social Affairs and Employment.

Within the UWV, insurance physicians are involved in implementing the ASB. Insurance physicians “provide social-medical evaluations with respect to the legislation concerning sick leave and employee disability” (Berendsen, 2007:227). They re-examine the welfare clients based on the ASB.

Second Phase

In 1998 the Second Phase was implemented in the upper levels of Dutch secondary school. The official objective of the Second Phase is to increase the quality of education (Tweede Fase Adviespunt, 2005:12). The implementation of this Second Phase was an ambitious change which consisted of three elements (Van Veen, 2003:87):

1. The implementation of a “constructivist” view of teaching and learning, called the Study House
2. The use of student study profiles, together with new subjects and more detailed student qualification structures
3. More autonomy for schools both in their choice of organizational and financial structure, and (formally) in their education method

The first element needs some clarification. It is considered the most important aspect for the work of the teachers (Van der Werf, 2005). The constructivist view differs from the more traditional behaviorist view, which was the basis for the training of most teachers until then (Greeno, Collins, & Resnick, 1996). Behaviorist views emphasize the process of knowledge transmission and the expert role of the teacher, rather than the learning activities of students. The teacher plays a central role in the delivery of knowledge and is assumed to be the authority responsible for the dissemination of knowledge. In contrast, current constructivist views concentrate on the process of learning and the role of the student in particular. Learning is assumed to be an active process of construction, and knowledge is the accumulation of information, as opposed to passive assimilation. The teacher is no longer the deliverer of knowledge but the facilitator of active learning. Practical implications are for example less “traditional classes” (one teacher explaining the material to 30 students at once). Instead, the students are learning the subject material more independently and in small groups, the teacher acting as a facilitator of this process, helping when necessary.

In the next sections we examine the degree of alienation of insurance physicians and teachers from these policies, by framing it into the different dimensions of policy alienation. When doing this, we also explore common factors influencing these dimensions.

3.3 Policy powerlessness

Powerlessness refers to the perceived influence public professionals have to shape the policy program at different policy levels. Have physicians and teachers experienced powerlessness, and, if so, which factors influenced this?

Influence at the strategic level

With respect to powerlessness at the strategic level, we have found hardly any evidence that the insurance physicians were able to influence the shaping of the policy. To do so, it would have been necessary to mobilize their professional associations and, although they tried, they did not see any results (UWV, 2005:4). The main professional associations of the physicians, the NVVG and the UWVA, did not become involved in the political debate concerning the drafting of the new rules (WAOcafé, 2005a). As a result, many physicians became frustrated with the lack of influence of their professional associations in shaping the ASB, and this contributes to feelings of powerlessness.

Looking at the strategic powerlessness of the teachers, a similar picture arises. Teachers felt that the implementation was done in a top-down way, without consulting them (NRC, 2007; Prick, 2006). If teachers want to influence the shaping of a policy, they also have to do so by means of their associations, particularly their professional associations and labor unions.

Unlike the physicians, teachers do not have one or two all-covering professional associations. Their professional associations are often subject-based. These associations did not have a lot of influence, which was mainly due to their lack of collaboration. They had different and often contradictory goals, resulting in an inability to lobby together effectively (Commission: Interviews, 2008:61,69,106). The labor unions of the teachers did also not have a lot of influence on the shaping of the Second Phase (Commission, 2008:52; Hemmer, 2007:72).

This lack of influence of the professional associations and labor unions increased the strategic powerlessness felt by many teachers. One other important effect was that the Second Phase was being implemented without sufficient funds for the teachers to implement the reform successfully. Funds were needed for, among else, training for the teachers -who had to teach new subjects- and changes in the infrastructure in schools – needed for the new way of teaching. The chairman of the major labor union (AOB) is sometimes seen as responsible for the insufficient funds, as he lowered his demands considerably (from €160 million to €22,3 million) (Commission: Interviews, 2008:77).

Influence at the tactical level

Tactical powerlessness refers to the perceived influence of the professionals concerning the way the policy is implemented in their organizations.

For the insurance physicians, the strict hierarchical nature of the UWV seems an important factor that negatively influenced the position of professionals since, because of this, they could not effectively affect decisions concerning the way the policy was implemented. The UWV was established in 2002 through the merger of six organizations. The relationship of the newly formed UWV with the Ministry is based on a contract-based form of governance, in which results and costs play an important role. Following this reorganization, several problems emerged. First, according to many employees, the UWV is “a Moloch [monster] with which people have difficulty identifying” (NRC, 2005a). Further, since cost reduction was a major objective in the reorganization, almost 10,000 people had to find another job. Lastly, that the UWV is perceived of as very hierarchical (WAOcafé, 2005b) .

Especially given the hierarchic nature of the UWV, physicians within the UWV are in a weak position. This made it very difficult for them to influence the way new policies, here the ASB, were implemented. An interviewed physician stated:

“We could not influence the policy very much. That is clear. The UWV is a top-down administrative organization focused on administrative processes. The professionals re-examining the clients are not the priority of the UWV. We were not consulted about the implementation conditions regarding the ASB.”

It seems that the degree of hierarchy of the organization was also relevant for the teachers. But while physicians felt they operated in a very hierarchic organization, many teachers experienced a more egalitarian structure. As an interviewed teacher put it: “I believe that the position of the teacher is very strong [in our school]. When you are a school manager you know that it will not work if you oblige teachers to do something they do not believe in”. Subsequently, in many schools teachers were in a strong position to influence the way the Second Phase was concretized in their schools. Because of this, many perceived to have influence on the way the Second Phase (in particular, the Study House) was concretized in their schools (Kips, 2003:48). Kips found, based on a survey of 142 teachers (43 per cent response rate), that 45 per cent did (fully) agree with the statement “I have enough opportunities to influence the way the Study House was implemented in my school”, against 28,4 per cent who did not (fully) agree.

But this is not the case for all teachers. In some schools, managers proved capable of doing this. Prick (2006:119) states that in these schools “school management dictates how the Study House has to be modeled”, thereby increasing the degree of tactical powerlessness experienced by teachers.

Influence at the operational level

Three factors seem relevant for the discretion open to physicians. Firstly, the content of the ASB substantially changed the discretion open to physicians. Many perceived their level of discretion - after the introduction of the ASB – to have decreased: “physicians had the feeling that they had less influence on their job and could use their own professional standards less” (NRC, 2005b). The survey by the NVVG (2005) comes to the same conclusion. Of the respondents, 63 per cent answered “yes” to the question whether they felt that their professional autonomy was lower than it should be. A second, related, reason for the decreased discretion was the influence of management, specifically

the strict internal UWV performance criteria and associated managerial focus on results associated with the ASB (NVVG, 2005).

However, this was not a universal feeling: some physicians did not agree that their discretion decreased. Therefore, thirdly, the type of professional one is also influenced the degree of operational powerlessness. As one physician put it, he could still make decisions “in all freedom” (WAOcafé, 2006). A number of physicians stated that they had considerable discretion, but that they have to provide a more thorough argument for their decisions, and this takes more time (NVVG, 2005:34). Further, some physicians who initially experienced reduced discretion have since accepted the situation. As one interviewed physician stated:

“In the beginning, I had a strong feeling that I was being constrained, in the sense that I had to increasingly justify my decisions. Actually, I could no longer decide [on my own] if someone was unfit for work. Even when someone could do almost nothing, I still had to send them to a labor expert. That was the biggest problem for me but, now I am used to it; I do not have problems with it any more.”

According to many teachers, the new rules (policy content) also substantially changed their discretion. In general we can state that the discretion of the teachers has declined. Kips (2003:54) notes that 75% of the Second Phase teachers agreed with the statement “because of the introduction of the Second Phase it became more difficult to deviate from the official program”. An important reason for this decreased discretion was, next to the policy content, the way management introduced the Study House in the schools. According to the Study House, students had to be able to learn more independently. For students to be able to do this, management more or less obliged teachers to construct the schedule of the course material before the start of the school year. In this way, the teachers were relatively bound to this schedule, making it more difficult to exercise discretion. Many interviewed teachers also stated that their discretion decreased. But, congruent with some physicians, a number of teachers did not experience decreased discretion, or did not experience this as unpleasant. They note that the discretion has been too extensive in the past. One interviewed teacher for instance noted that “Ultimately I experienced it as an attempt to curtail the autonomy of teachers. Well, that makes some sense. Before the Second Phase, a teacher could really perform very badly before someone dared to intervene.”

Concluding, many physicians and teachers experience feelings of powerlessness in implementing the new policies. On a strategic level, the influence of the professionals association proved an important factor influencing the degree of powerlessness for both groups. On the tactical level, the degree of hierarchy in the organization was important in explaining powerlessness. But while physicians felt they operated in a very hierarchic organization, many teachers experienced a more egalitarian structure. The degree of discretion was particularly dependent on the contents of the policy, the way management concretized the policy and, lastly, on the type of professional.

3.4 Policy meaninglessness

Here, meaninglessness is in terms of the perception of the professional regarding the policy's contribution to a larger purpose and this can be on the strategic, tactical and operational levels.

Strategic level

In the case of the ASB, the official goal is to increase the participation in work of the disabled by looking at a person's potential rather than their limitations (SZW, 2005). Two important arguments for this are, firstly, the view that it is nearly always healthier for people with physical or psychological problems to be active and, secondly, that Dutch social security has become too expensive and had to be reorganized to save money.

Do the physicians see these policy goals as meaningless? In the eyes of many, the economic goal of the ASB seems to be the most important. As one physician put it: “I see it more as a cost savings policy than a method to get people in work.” (WAOcafé, 2006). This suggests that in the implementation of the ASB, NPM-based considerations (cost reductions and efficiency gains) seem to dominate the trade-offs between values, leading to a shift in value orientation. This was not welcomed by most physicians (NVVG, 2005; WAOcafé, 2006).

Next to the perception that the policy goals were predominantly economic, our respondents stated that the multitude of policy changes also contributed to strategic meaninglessness. Between 2002 and 2006, major policy changes included the “Gatekeeper Improvement Act”, the ASB and a

new law on work and income. Before physicians were able to work out what one policy would mean for their work, there was already another policy to implement. Such a situation, contributes to feelings of strategic meaninglessness. As one interviewed physician put it:

“Lately there have been so many changes. First the adjustments to the ASB, now the law regarding work and income. It happens all the time. I do not feel “connected” with politicians. Often they propose things which are not well thought out, and which have to be implemented right away.”

Looking at the teachers, we see that the official objective of the Second Phase is to increase the quality of education in Dutch secondary schools and improve the connection with higher education (Tweede Fase Adviespunt, 2005:12). Obviously, almost all teachers experienced these goals as laudable, thereby experiencing low strategic meaninglessness. Kips (2003:49) in her survey of 142 teachers, found that 66,4% (fully) agrees with the goals of the Second Phase, while 10% (fully) disagrees (avg. 3,6). One teacher expressed his agreement as follows: “The goal of the Second Phase as it was once formulated, to improve the connection with higher education, is excellent” (Commission: Interviews, 2008:632).

However, in our interviews, a few teachers noted that the Second Phase also had other goals. They noted that the Second Phase intended to reduce the costs of education and diminish the teacher shortage. This was possible as students had to work more independently, congruent with the new constructivist view on learning. This was not welcomed by these respondents. As one phrased it:

“Well, we obviously are confronted with a teacher shortage. They [politicians] worry about this. So when you decrease the number of hours a teacher teaches for every class, teachers can teach more classes and the shortage is solved. But I do not consider solving the teacher shortage an appropriate justification for introducing the Study House.”

Another factor influencing strategic meaninglessness was the number of policy changes. As for the physicians, this factor contributed to strategic meaninglessness (NRC, 2007a:10; Prick, 2006; Commission, 2008:648), although the interviewed teachers experienced this factor less prominently than did the interviewed physicians.

Thirdly, the professional orientation of the teachers seems relevant. Some teachers did agree with the goals of the Second Phase, while others did not. Van Veen (2003:103) states that “teachers do not constitute a monolithic block with the same attitudes, educational philosophy, subjective educational theory, values, or orientations towards the professional, pedagogical, and organizational aspects of their work”. Therefore, he discerns between two broad types of teachers. On the one hand teachers who are student-oriented and consider personal and moral development to be among the goals of education. On the other hand there are teachers who are more content-oriented and consider qualification to be more or less the only goal of education.

Looking at the two types of teachers, we can state that the Second Phase constructivist orientation of teaching fits better with the first group, while the more traditional, behaviorist view matches the second group. Congruent with this, we notice that more student-oriented teachers experienced the policy as more meaningful: “A significant positive relationship exists between the approval of the goals of the reform and the orientation towards learning and students” (Kips, 2003:50-51). On the other hand, teachers with a more traditional view on teaching appreciated the Second Phase significantly less (Kips, 2003; Van Veen, 2003:127).

Tactical level

On the tactical level, meaninglessness refers to the perceptions of professionals regarding the contribution of their agency towards the handling of specific problems or the delivery of public goods.

The UWV had to implement the ASB and, in a short period, more than 325,000 people had to be re-examined. To achieve this, the UWV focused primarily on the number of re-examinations completed, thereby using strict performance criteria and a focus on results. While most professionals agreed with re-examination in theory, the strict (quantitative) performance criteria associated with this process had some unwelcome consequences. Most importantly, the UWV had to recruit external physicians and labor experts, often unregistered, to cope with the increased workload. Almost all the respondents disagreed with this practice; as one interviewed physician explained:

“What really bothers us [insurance physicians] is that, owing to a shortage of re-examination capacity, physicians are brought in from outside. These physicians often do not know what they are talking about. They just have an interest in finishing as many cases as possible a day. The quality they deliver is really unsatisfactory.”

Looking at the teachers, we also note the important role of management in explaining the degree of tactical meaningfulness experienced.

School managements were in a difficult situation when they had to implement the Second Phase. There were insufficient funds and time available for the schools to properly implement this complex reform (Commission, 2008:52,134). In the survey of Kirschner & Prins (2008), 85% of the teachers agreed with the statement that there was not enough time and money available for a proper implementation. One important result was that the workload of the teachers increased significantly. With the Second Phase, teachers had to develop new and more study guides, had more meetings and had to attend more retraining courses (Kips, 2003:36). The outcome was that 80% of the teachers experienced a higher workload (Kips, 2003:59; Tweede Fase Adviespunt, 2005:14).

In this difficult situation, the way school management operated strongly influenced the degree of tactical meaningfulness teachers experienced. In some schools, management used the increased autonomy of the schools to implement only the minimum requirements of the Second Phase. In so doing, schools could cope high teacher workload, problems of funding, necessary infrastructure changes and late delivery of books. Teachers perceived this as very meaningful, stating that they owed implementation success primarily to this so-called "low-profile" implementation (Commission, 2008:134). As one interviewed teacher phrased:

"Changes in this school are gradual. We appreciate this highly. This fairly conservative way of managing works. They [management] do not dare, as happened at other schools, to just impose changes upon teachers. This is why people still satisfactorily work here."

However, in other schools, this was not the case. The increased autonomy was sometimes also used to increase bureaucratization; more management and fewer funds for the primary process (Commission, 2008:9). This increased the degree of tactical meaningfulness.

Operational level

At the operational level, meaningfulness refers to the professionals' perceptions of their own contribution to dealing with concrete, individual cases.

Between physicians, significant differences existed in their experienced operational meaningfulness. As stated, from the 230,000 clients they re-assessed, 90,000 saw their benefits lost or reduced. One and a half years after the re-examinations, from these 90,000, 52% still had not found a job (Van der Burg & Deursen, 2008:80). A number of physicians identified strongly with this unfortunate group, feeling that they did not help them, in so experiencing a high degree of operational meaningfulness (LVA, 2006; NVVG, 2005). As one commented (cited in NRC, 2005a):

"I cannot put my signature to a medical evaluation which inevitably results in state assistance for the person ...someone who is unemployed for ten years, and searching for a job again, that it impossible. The statements by the Social Economic Council (SER) are right: they state that you shouldn't construct the ASB."

However, not all shared this view, a number of respondents stressed that, especially for younger claimants, it could be worthwhile decreasing work-disability benefits. In fact, in their view, being labeled as work-disabled for a very long time is detrimental to people's health. This is in line with the first argument behind the ASB: that it is healthier for people to be active. In this way, they identified more with the policy program and less with the immediate wishes and concerns of the client. Some of these physicians explicitly distanced themselves from the physicians who did have problems with the ASB. For instance, one interviewed physician distinguished between, in his words, old-fashioned or "soft" physicians – those who regard the new policy as too strict and identify with the clients – and modern physicians – who see reactivating clients as the proper way to act.

Teachers also differed in their operational meaningfulness. With the introduction of the Study House concept, students had to work more independently. This was one of the major changes affecting the students. In many schools, management framed this by diminishing the number of hours teachers taught per class. Many content-oriented teachers experienced this situation as detrimental for the students (Commission, 2008:139; Kips, 2003:54; Nierop, 2004:24). The following quote of an interviewed - more content-oriented – teacher illustrates this:

"I had the idea that, as I had so many classes with fewer hours per class, it became too much for me. That segment of students which is not very able and also not prepared to work hard, I think they really became the victim of it all."

More student-centered teachers, however, felt that their implementation of the Second Phase is very meaningful (Van Veen, 2003:60). As one put it:

"Because of the Second Phase, I feel that I am better able to help the students. Before, it was only old-fashioned teaching. Then you do not have that many opportunities to really help them. In that way, I think it is better know."

Concluding, we identified a number of common factors influencing meaninglessness. Looking at the degree of strategic and operational meaninglessness, the professional orientation seemed to be relevant. In the case of the teachers, we could frame this in two groups, content-oriented teachers, who experienced more meaninglessness, and learning-oriented teachers, experiencing less meaninglessness. This proved more difficult to do this for physicians, but also here it seems that there are differences between them regarding their professional orientation.

Further, the goals of the policy and the number of policy changes proved important factors for the experienced strategic meaninglessness, although physicians experienced policy changes as more important than did teachers. For the tactical level, the way management concretized the policy proved very important for both groups.

3.5 Role conflicts

Two role conflicts are particularly relevant for both physicians and teachers.

Institutional-client conflict

The first role conflict emerges from the tension between the rules and regulations of the policy (institutional logic) and the demands and values of the claimants (client logic).

As noted earlier, many physicians are doubtful that the reassessment of claimants actually contributes to the work participation goal of the ASB. Moreover, even where they do see it as meaningful that the benefit is being lowered -for example for younger claimants- this does not necessarily decrease the role conflict. This is because most clients, according to Van der Burg and Deursen (2008) as much as 70% did not agree with the outcome of their re-examinations. In effect, all the interviewed physicians experienced some degree of institutional-client logic conflict. As one interviewed physician put it:

"What you notice is that clients are re-examined using today's norms. Nowadays, there is a lot more emphasis on re-activating the clients. A direct result is that the financial status of the clients changes [as their disability benefit is reduced]. That has a considerable social impact on these clients."

For the teachers, we would not expect an increased institutional-client role conflict, as, in theory, the goals of better education and better connection with higher education do not conflict with the demands of most students. But in practice, the Second Phase – in particular the Study House – did conflict with student demands, especially according to the more content-oriented teachers. They perceived that, because of the Second Phase, students have less equal chances, have lower motivation and have lower grades. Van der Werf (2005:32) describes this problem as follows: "Concluding, we can state that the new way of learning [the Study House] in the best case does not lead to favorable effects for students, and that in some aspects even leads to negative results". The more student-oriented teachers, on the other hand, did experience less role conflicts, congruent with their low degree of operational meaninglessness.

Organizational-professional conflict

A second role conflict emerges from the tension between the organizational and the professional logic.

First, we examine the physicians. Their managers want the work to be done as efficiently as possible: "they have a strong faith in figures" (Berendsen, 2007:227). The physicians, on the other hand, want to retain their own professional norms and discretion. It would seem that many professionals experience an increasing threat to their professional norms because managers focus on the quantity of re-examinations completed. As one physician put it: "There is clearly a culture of repression. Management does not understand that physicians need time. Tension arises when physicians want to work accurately whereas managers tell them that they have to do 15 re-

examinations a week". This feeling is, however, not universal. For instance, some respondents stated that they could effectively cope with this role conflict by communicating with their manager.

For teachers, the relation between management and professionals changed with the introduction of the Second Phase. With the Second Phase, schools became more autonomous. This had three main consequences. In some schools, the increased autonomy led to an increased bureaucratization; more management and fewer funds for the primary process (Commission, 2008:9). Next to leading to more perceived tactical meaningfulness, this also increased the role conflict between management and teachers.

However, in some – often other - schools, the increased autonomy caused the management to choose for "low-profile" implementation. As well as decreasing the experienced tactical meaningfulness, this also decreased the role conflict between managers and teachers.

Thirdly, with the increased autonomy, many school managers wanted teachers to participate in all kinds of activities. This is strongly linked with the high degree of tactical powerlessness teachers experienced. The influence of this increased participation on the role conflict depended on the type of teacher. The more content-oriented teachers often did not welcome these new activities, as they saw it as distracting them from their "real" work, educating their students (Van Veen, 2003:66). Student-oriented teachers, however, perceive this required participation as valuable. They can for example support each other as teachers during meetings. In this way, the professional orientation proved relevant for the degree of role conflicts experienced.

Concluding, we see that a number of factors influenced the above role conflicts. The policy goals, in combination with the client needs, influenced the degree of experienced institutional-client conflict. Further, the way management concretized the policy, as well as the professional orientation of the implementer, influenced the degree of experienced organizational-professional role conflict.

4 Conclusion and discussion

In policy implementation literature, the role of the public service worker implementing the policy is widely seen as crucial for policy performance. Many scholars emphasized loyalty or commitment of the implementing public service worker towards the policy as a prerequisite for effective implementation. Few, however, have provided a coherent framework – including causes and effects - for analyzing the important role of the implementer. It is important to develop such a framework, according to Winter (2003:221, his emphasis). He states that there is a "need for more theory development and testing, and the development of partial theories seems more promising than continuing the search for the general implementation theory or model". Because of this, we developed a framework that focuses on one aspect of implementation, that is, the experiences of public professionals with the policies they have to implement. We conceptualize this in terms of policy alienation.

To study policy alienation, we defined the dimensions of the concept by means of a literature study. Next, we tried to determine common factors influencing these dimensions using a comparative case study of Dutch physicians and Dutch teachers implementing new policies. The results of the case study are presented in Figure 1.

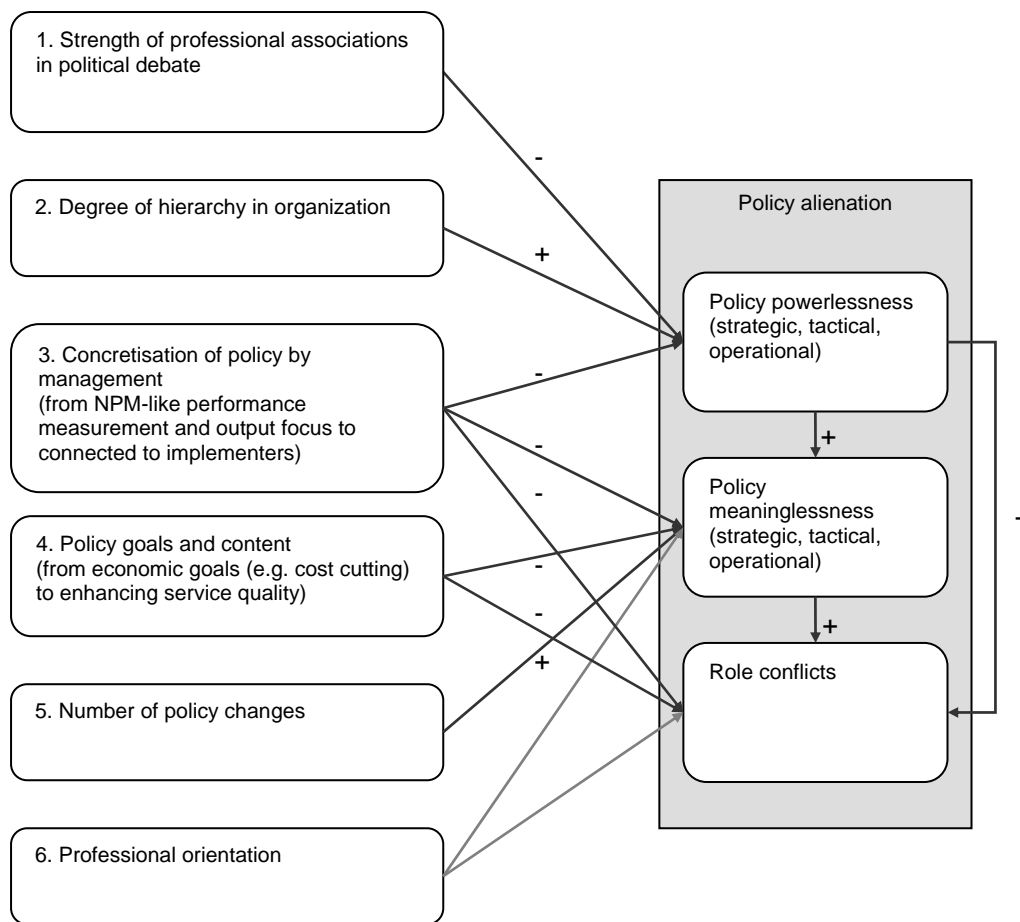


Figure 1 Important factors influencing the degree of policy alienation felt by teachers and physicians

Some useful observations can be made. First, the figure emphasizes how the various policy alienation dimensions influence each other. For example, when professionals experience low discretion/high operational powerlessness, they feel less able to effectively cope with role conflicts. Or, if professionals experience the policy goals as meaningless, they will experience a greater role conflict between the institutional logic and the client logic if their client opposes the policy.

Further, we identified six major factors which could influence policy alienation. We should note that this selection of variables is arbitrary. We have undoubtedly missed some factors and some factors may be more important for one professional group than for another. Further, the factors we did identify, are defined broadly. The concretization of the policy by management, for example, can encompass many different kinds of managing, or encompass different management sections in the organization. However, given these considerations, we feel that the identified factors are relatively important in explaining the policy alienation of the two professional groups. In so, we tried to meet the second objective of this study; to determine common factors influencing policy alienation.

In Figure 1, we indicated the influence of the factors on the policy alienation dimensions. We can now examine this and, thereby also showing the relevancy of the policy alienation model in explaining policy performance.

Firstly, our empirical study shows that the stronger the professional associations, the lower the degree of powerlessness experienced. The studied professional groups both experienced high strategically powerlessness, as their professional associations could not significantly influence the policy. According to implementation literature, this can affect policy performance. When implementers feel uninvolved, this often negatively influences their commitment to the particular policy (Burke, 2008:95; May, 2003:227). This lower commitment may, as stated, negatively affect policy performance (Hood, 1976).

The weak position of professional associations can also affect performance in another way. When professional associations are uninvolved in the policy design phase, possible useful input from the implementing professionals cannot be taken into account. In this way, not involving the

implementing professionals in designing the policy might lead to an ill-constructed policy, which may, in turn, negatively affect policy performance.

The second factor, the degree of hierarchy in the organization, strongly resembles the first factor. We showed that the more hierarchic the implementing organization, the higher the degree of experienced powerlessness. In the case of the physicians, the strict hierarchic nature of the UWV made it difficult for them to influence the way the policy was concretized by their organization, thereby increasing their degree of tactical powerlessness. Conversely, for teachers, the flat structure of the schools and consequently strong position of teachers enabled them to influence the way the Second Phase was concretized in their schools. Looking at implementation literature, we can then state that, when the organization is very hierarchic, professionals feel uninvolved in the concretizing of the policy, lowering policy commitment. This might, in turn, negatively affect policy performance. Further, the policy performance can also be lowered as the possibly useful input from professionals can in this situation not be taken into account while concretizing the policy.

Thirdly, we noticed that the way management concretized the policy influenced all dimensions of policy alienation. In the case of the physicians, the way UWV management used NPM-like performance measurement and a focus on output was not welcomed by the physicians. Therefore, we showed that, the more management concretizes the policy by focusing on performance measurement and output controls, the higher the degree of powerlessness, meaninglessness and role conflicts (see also Tummers et al., 2008).

On the other hand, when management is more “connected” with the implementing professionals, this decreases the experienced powerlessness, meaninglessness and role conflicts. Many schools implemented only the minimum requirements of the policy, thereby acting as a buffer between the policy requirements and the teachers. This behavior of school management is interesting. According to Goggin et al. (1990), policy performance is enhanced by building capacity for implementing organizations, such as funding, training and technical assistance. For the schools, these elements were largely not in place. Schools coped with this by implementing only the minimum requirements of the policy, thereby using their autonomy. So, we notice that the autonomy of these schools can mitigate capacity problems (see also Torenvlied, 1996).

Fourth, we observed that the policy goals and content influenced the degree of meaninglessness and role conflicts. In the case of the ASB, its cost reduction goal increased the degree of meaninglessness and role conflicts experienced by many, but not all, physicians. On the other hand, many teachers embraced the official goal – education quality enhancement - of the Second Phase. However, some teachers stated that the policy also had other, less laudable, goals, such as reducing the costs of education. The degree of experienced meaninglessness can have important consequences. According to Brehm & Gates (1997), seeing policy goals as meaningless can affect policy performance, as, when implementers do not agree with the policy, they might “shirk” or even sabotage the policy.

Fifthly, the many policy changes increased the sense of policy meaningless for many professionals. The case study shows that many professionals do not see value in the policy, as there have already been so many policy changes. McElroy (1996) terms this with the notion of “change fatigue” - the accumulated human and organizational fatigue created by frequent, serial changes. Change fatigue can have perverse consequences. He suggests that it can result in initiative overload, organizational chaos and resistance to change. These, in turn, might negatively influence policy performance.

Lastly, we noticed that the professional orientation of the implementers is important for the degree of meaninglessness and role conflicts experienced. This is especially the case for teachers, who can be broadly characterized as student-oriented or content-oriented. This factor can also affect policy performance. For policy performance, it is paramount that the professional orientations of implementers are congruent with the policy program. For example, Sandfort (2000), examining the professional norms of front-line workers, concludes that when management initiatives are consistent with professional norms, front-line workers find it reasonable to comply with new directives. But when these directives appeared illegitimate or disconnected from their norms, workers could pursue alternative objectives and definitions of success, thereby possibly hampering policy performance.

Concluding, our research shows that the policy alienation concept can be valuable in explaining the problems experienced by public professionals when implementing a policy. Further, we have showed how the framework can be linked to policy performance. Additional research is needed to explore the concept further both empirically and theoretically.

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